

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		6/26
O.I.P.E. CLASSIFIER	NW	32	7/5
FORMALITY REVIEW	FR	1013	1043-01
RESPONSE FORMALITY REVIEW	AM	917	11-013-01

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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